

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**  
**UTILITY PATENT APPLICATION TRANSMITTAL**

FIRST NAMED INVENTOR OR APPLICATION IDENTIFIER: **Shantanu Sarkar et al.**

TITLE: **METHODS AND APPARATUS FOR DISCRIMINATING POLYMORPHIC TACHYARRHYTHMIAS FROM MONOMORPHIC TACHYARRHYTHMIAS FACILITATING DETECTION OF FIBRILLATION**

CERTIFICATE UNDER 37 CFR §1.10: I hereby certify that this Utility Patent Application Transmittal and the documents referred to as enclosed therein are being deposited with the United States Postal Service, in an envelope addressed to: Mail Stop Patent Application, Commissioner of Patents, P.O. Box 1450, Alexandria, VA 22313-1450, \*EXPRESS No. EV 331 792 926 US, on this 29<sup>th</sup> day of August, 2003.

Sue McCoy  
Printed Name  
Signature

MAIL STOP PATENT APPLICATION  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

We are transmitting herewith the attached:

☒ **Patent Application Transmittal**

☒ **Specification:**

**Total pages:** 52 (including claims and abstract: Spec. 38 sheets; Claims 12 sheets; Abstract 1

☒ **Drawings:**

**Total sheets:** 6

☐ formal

☒ informal

☒ **Combined Declaration and Power of Attorney:**

☒ **unexecuted**

☐ copy from prior application

☐ Deletion of Inventor(s) - Signed statement attached deleting inventor(s) named in the prior application (37 CFR 1.63(d)(2) and 1.33(b))

☐ Incorporation by Reference - *The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied above is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.*

☒ **Accompanying application parts:**

☐ Notification of filing a

☐ Assignment of the Invention to Medtronic, Inc.

☐ Assignment cover sheet

☐ Information Disclosure Statement

☐ PTO Form 1449

☐ Copies of IDS citations

☐ Preliminary Amendment

☐ A copy of the Petition or Conditional Petition for Extension of Time in the prior application.

☒ Return Postcard

**IF A CONTINUING APPLICATION:**

☐

**Continuation**  
No. .

☐

**Divisional**

☐

**Continuation-in-part (CIP) of prior application**

☐

**Amend the specification by inserting before the first line the sentence: --This application is a of application Serial No. , filed , now allowed.--**

☐

**Cancel in this application original claims \_\_\_\_ of the prior application before calculating the filing fee. (At least the original independent claim must be retained for filing purposes.)**

☐

**The prior application is assigned of record to Medtronic, Inc.**

☐

**The Power of Attorney in the prior application is to: \_\_\_\_.**

15535 U.S. PTO  
10/652757  
08/29/03

☐ This application claims the benefit of U.S. Provisional Application(s) Serial No.(s) 60/430,926, filed December 4, 2002.

☒ Address all future correspondence to: Girma Wolde-Michael, Reg. No. 36,724  
Telephone: (763) 514-6402  
No. 27,581

FEE CALCULATION	No. of Claims			No. of Extra Claims	Rate	Fee
	Filed	Claims Included in Base Fee				
Total Claims	25	20	=	5	x 18	90
Independent Claims	4	3	=	1	x 84	84
Multiple Dependent Claims	0			0	+ 280	0
Basic Filing Fee						\$750.00
TOTAL						924.00

☒ Charge Deposit Account No. 13-2546 in the amount of \$924.00 for the filing fee and extra claims fee.

☒ The Commissioner is hereby authorized to charge any fees which may be required under 37 CFR 1.16 and 1.17, or credit any overpayment to Deposit Account No. 13-2546. A duplicate of this transmittal is enclosed.

02/29/03  
Date

  
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